 <p>Michigan Department of Human Services</p> <p><b>CSA</b></p> <p>Children's Services Administration Communication Issuance</p>	<b>Type:</b> <input checked="" type="checkbox"/> Informational Memorandum (IM) <input type="checkbox"/> Program Instruction (PI) <input type="checkbox"/> Policy Guide (PG)	
	<b>Issuance Date:</b> 08/19/13	<b>Obsolete Date:</b> n/a
	<b>Response Due:</b> n/a	
	<b>Log No.:</b> 13-099	
	<b>Contact:</b> Lisa Kinkema, MiSACWIS@michigan.gov	
	<b>Originating Office:</b> MiSACWIS Project Office	
	<b>Subject/Title:</b> Foster Care Payments in MiSACWIS	
	<b>Distribution:</b> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> DHS Child Welfare Staff  <input checked="" type="checkbox"/> Private Agency Child Welfare Staff  <input checked="" type="checkbox"/> CSA Central Office Managers/Staff  <input type="checkbox"/> Native American Tribes  <input checked="" type="checkbox"/> Data Management  <input checked="" type="checkbox"/> DHS County Directors  <input type="checkbox"/> Adult Services Staff  <input type="checkbox"/> Other: BSC Directors         </div> <div> <input checked="" type="checkbox"/> BCAL  <input checked="" type="checkbox"/> CWTI  <input checked="" type="checkbox"/> SACWIS         </div> </div>	

The Michigan Statewide Automated Child Welfare Information System (MiSACWIS) will be the single, statewide system for child welfare in Michigan; both DHS and contracted private agency staff will use MiSACWIS to document case activities. Contracted child-caring institution (CCI) staff will also use MiSACWIS to validate payments. MiSACWIS will eliminate the need for the DHS-4765 Children's Foster Care Invoice (commonly known as "bubble sheets") when authorizing foster care payments. Moreover, this system of validation will apply to all funding sources, including child care fund (CCF) payments.

In MiSACWIS, the primary foster care worker (DHS or private agency) is responsible for updating a foster child's placement. A new placement will generate a service authorization and the worker's supervisor will approve the authorization. DHS purchase of service (POS) monitors will then review and approve all private provider service authorizations; the DHS supervisor has final approval on all payment requests except for authorizations that require approval by Federal Compliance Division staff per DHS policy.

There are many time and cost savings associated with the automated payment process changes in MiSACWIS. MiSACWIS will allow for more accurate payment processing and communication between DHS and private agency staff. It will be more accessible to all assigned workers, since all parties involved in the case have access to view and update the child's placement and service authorizations as appropriate. MiSACWIS project staff has created the attached PowerPoint presentation titled, ***Introduction to Payments***, which includes an overview and screen shots of the new MiSACWIS payment process. (Reference **Attachment A**).

#### **MiSACWIS Payment Request Validation Processes**

There will be two ways to validate a payment request following statewide implementation of MiSACWIS. The following information is provided to summarize those two processes, along with notations about specific payment types that will not require a validation process.

#### *Interactive Voice Response (IVR) system*

The following types of providers will validate their payment requests by calling either of the new IVR telephone numbers 1-800-MiFoster or 855-643-6783 via a touchtone phone. (Note: these telephone numbers will not be operational until statewide implementation.)

- DHS licensed foster parents
- Unlicensed relatives who are receiving state ward payments
- Non-contracted providers
- Private agency foster homes if DHS has “borrowed a bed”
- Out-of-state providers (all provider types)

To validate the days in care through the IVR, providers will need two pieces of information when calling the IVR system:

1. Bridges Provider ID: Bridges is a DHS computer system that records public assistance and provider (licensed and unlicensed) information. Current providers should already have their Bridges Provider ID; it can also be found on current Children’s Foster Care Invoices (DHS 4765). As new providers are enrolled in Bridges, they will receive correspondence that includes their Bridges Provider ID.
2. Unique IVR provider identification number (PIN): At the time of statewide implementation, MiSACWIS will generate correspondence to all current providers informing them of their Unique IVR PIN. As new providers are enrolled in Bridges and receive their Bridges Provider ID, MiSACWIS will then generate correspondence through the central print center that includes their Unique IVR PIN.,

An IVR validation training video is currently being developed for providers and workers and will be announced in the near future through a mass provider mailing and a CSA Communication Issuance.

#### MiSACWIS Application

Private agency and CCI staff will complete their verification of child placements and payment requests within the MiSACWIS application. Private agency workers will be responsible for recording child placements in MiSACWIS and submitting the payment authorization for approval to the DHS worker and supervisor. Once DHS has approved the placement and payment authorization, the agency’s payment roster will be available for verification by the roster verifier in accordance with the payroll schedule. CCIs will validate all board and care payments on their assigned rosters in this same fashion. This will continue without interruptions, barring any changes to a child’s eligibility, every two weeks until the payment authorization has ended.

**NOTE:** *There will be a new user group in MiSACWIS for a Non-DHS Roster Verifier. The roster verifier will attend the two-day MiSACWIS statewide training (a separate communication issuance will be published with the MiSACWIS training dates). Ideally, the MiSACWIS payment roster verifier will be the same person who currently completes the bubble sheets; due to security reasons, the payment roster verifier cannot be a caseworker. The roster verifier will have read-only access to applicable case information to review for payment processing. Central Office also has DHS Roster Verifier security role for emergency validations.*

Private agencies will continue to pay their foster homes outside of MiSACWIS. Private agencies and CCI staff will also have access to their agency’s payment history, which allows for the tracking of all payments and the ability to troubleshoot any problems.

#### Special Payments/No Validation

The following types of payments will not require either of the two validation processes described above.

- Independent living (IL). Youth receiving IL payments, including Young Adult Voluntary Foster Care (YAVFC) youth, will not be required to call the IVR to receive IL payments. Private agencies will, however, need to validate the administrative rate portion of the payment if they are supervising the IL placement.
- Subsidy. Once approved by the subsidy office, adoption subsidy and guardianship payments will continue and the adoptive parents will not need to follow the IVR process to verify the child's placement except through the annual reporting process.
- Case services and manual payments, formerly known as non-scheduled payments. Once approved by the DHS supervisor or Federal Compliance Division per policy, these payment requests will be sent to MAIN and processed. (MAIN is the Michigan Administrative Information Network, a system that tracks payments for all individuals and entities receiving payments from the State.)
- Trial reunification payments. These payments will not be made in MiSACWIS; Federal Compliance Division staff will continue to pay the trial reunification payments manually once a child has been returned home under the supervision of a private agency.

#### **New Payment Form**

The system generated ***Foster Care Payment Authorization*** (DHS 659) will replace both the ***Foster Care Payment Authorization*** (DHS 626) and the ***Non-Scheduled Payment*** (DHS 634) forms. Foster care workers will use this form for board and care, case services and manual payments. MiSACWIS users will be able to print out this form from MiSACWIS to obtain the necessary signatures for approval. Policy for signature approvals will not change with MiSACWIS.

#### **Child Care Fund Payments**

CCF payments will be processed using the DHS 659 but will not be sent through MAIN. MiSACWIS creates a separate CCF payment roster for efficiency in processing CCF payments. The biggest difference in the new MiSACWIS process will be that the provider and/or foster home will have already verified the payment, and DHS staff will have approved the payment prior to the payment submission. Validation of these payments will occur for the same two-week payroll periods for other MiSACWIS payments.

Local DHS staff will submit the approved DHS-659 for each child, along with the CCF payment roster following local procedures for payment. If local procedures allow, the DHS staff may scan and PDF the documents before submitting them to the county fiscal staff. The attached PowerPoint presentation titled, *CCF Tools within MiSACWIS*, details the CCF process within MiSACWIS (Reference Attachment C).

#### **Transitional Payroll Schedule**

A modified payroll schedule for the transition of payments from SWSS to MiSACWIS is currently being developed. This schedule will be released under separate cover upon completion.

#### **Provider Notices and Other Communication Efforts**

Due to the significant differences between the current payment processes and the new MiSACWIS system, the following efforts are being completed:

- DHS is sending the attached provider message in current payroll notices and it will also be mailed to all providers who have received a payment within the last year. (Reference Attachment D.)

- BCAL will be revising the foster parent certification training to include this information.
- DHS is coordinating with the State Court Administrative Office (SCAO) to share information with the county courts.
- Creation of a ***Determination of Care (DOC)*** video that is already posted to the MiSACWIS Website. This video explains in detail how the DOC process will work in MiSACWIS.
- Creation of the MiSACWIS web-based training (WBT) ***Manage Payments*** is located in Omni-Track Plus for staff to complete.
- Technical assistance with MiSACWIS liaisons to disseminate information in their offices.
- The MiSACWIS statewide training will cover the new MiSACWIS payment processing, including the roster verifier role.
- Finally, the ***MiSACWIS Design Frequently Asked Questions (FAQ)*** document has a number of questions and answers on the new MiSACWIS payment processes. This document is also posted to the MiSACWIS Website.

Local DHS staff and private providers should begin to discuss these changes with their foster parents. Payment questions will be directed to the primary foster care worker when there are issues. Once the IVR video is available, it is recommended that licensing staff share this video with their foster parents during a training session.

Payment-related questions should be directed to the MiSACWIS liaison, who will then contact the MiSACWIS Project staff at [MiSACWIS@Michigan.gov](mailto:MiSACWIS@Michigan.gov).

## > *Introduction to Payments*



WELCOME



Michigan Statewide Automated Child Welfare Information System

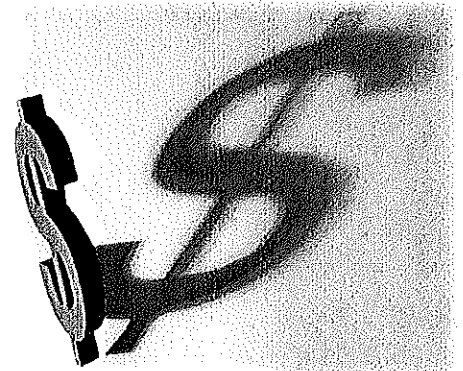
## > It takes many people to make it work

- DHS & private agency caseworkers
- Fiscal staff – DHS & private agencies
- Financial Administrator
- Roster verifiers (Private agencies and CCI's)
- Interactive Voice Response (IVR) system (DHS, out-of-state, "borrowed-bed" and non-contracted providers)
- Central office staff:
  - Contracts and Rate Setting
  - Federal Compliance Office (FCD)
  - Data Warehouse
  - Warrant Control
  - Reconciliation & Recoupment
  - Payroll and Accounting

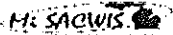


## > Service Authorizations

- Created and set to “pending” status upon approval of paid placements and case services
- Who can create them?
  - » CPS, foster care (including URM), juvenile justice, prevention, guardianship, and subsidy workers
- Who can approve them?
  - » DHS Supervisors
  - » Federal Compliance Division (FCD)
- Prefills with information from:
  - Placement/case service record
  - Provider/contract record
- Fund Sources (IVE, SWBC, Ltd Term, CCCF, DHS-93, YIT, URM)
- Borrowed bed and option to select payee
- Cost Types (Service Authorization types)
  - Contracted
  - Standardized
  - User Defined
- Budgetable income of IL youth
- Ward children of a teen parent (if applicable)



# > Service Authorization Screen



STG

home | search | help & training | switch organization | log out  
Logged In: Parnell, Wayne | DHS Central Office

Client Name: **Octavious, Doc**  
Creation Date: **10/20/2009**

Person ID: **76771**  
Last Modified Date: **10/20/2009**

Organization: **16074**  
Service Auth ID: **16074**

## Service Authorization Detail

### Service Description: \*

**0780-General Foster Care**

Fund Source: **IV-E**

Override Fund Source:

Approved Units:

Commitment County:

County of Supervision:

Responsible Fiscal

County: \*

County: **Oakland**

MISACWIS Provider ID:

Mail To:

License End Date:

Organization MISACWIS

Provider ID:

94792

09/30/2011

1295463

Placement/Case Service

ID:

Cost Type: \*

☐ Admin Only

**Link Contract**

Contract Type:

Provider:

Contract Number:

Contract Rate:

Description:

MISACWIS Contract ID:

MISACWIS Contract Cost

ID:

Rate Begin:

Rate End:

Maintenance:

Age Add On Amount:

Treatment /

Administration:

Medical:

Other / Non-Split:

Contract Rate:

Add On Amount:

18535

**Contracted**

**Link Contract**

Contracted

632586

PAFC-000001

### Payment Summary:

Paid Units:

Amount Paid:

Units:

Remaining:

Amount:

Remaining:

Comments:

Spell Check Clear Autosave

Michigan Statewide Automated Child Welfare Information System





## > Service Authorization screen Add on Summary grid

**Add On Summary**

Item	Age	Amount	Start Date	End Date	Notes
1000	10	\$3.35	11/15/2011	11/15/2013	N/A


**Approval**

☐ Created in Error

**Apply Save Cancel**

- This is the bottom portion of the service authorization screen that includes the Add On Summary costs
- This screen also includes the:
  - Approval button (DHS Supervisors, FCD or worker routes service authorization for review to his/her supervisor or DHS monitor, etc.)
  - The Created in Error check box stops a payment request from being generated

## > Add on Costs screen

		STG		<a href="#">home</a>   <a href="#">search</a>   <a href="#">help &amp; training</a>   <a href="#">switch organization</a>   <a href="#">log off</a>	
				Logged In: parnell, wayne [ DHS Central Office ]	
				<a href="#">help</a>	
Client Name:	Octavious, Doc	Person ID:	76771	Organization:	DHS Central Office
Creation Date:	10/20/2009	Last Modified Date:	10/20/2009		
<b>Per Diem Cost</b>					
Service Description:	General Foster Care			Service Auth ID :	16074
Cost Reason: *	<input type="text" value="Determination of Care"/>				
DOC Level:	<input type="text" value="Determination of Care"/>			DOC Approval Status :	
Effective Date: *	<input type="text"/>			End Date:	<input type="text"/>
Add On Amount: *	<input type="text"/>			<input type="button" value="Calculate"/> <input type="button" value="Clear"/>	
<input type="button" value="Approval"/>					
<input type="button" value="OK"/> <input type="button" value="Cancel"/>					

- Cost Reasons
  - Determination of Care
  - SED-W calculates to \$50.00 maintenance cost
  - American Indian \$2.50/day added to agency administration cost
- Select Cost Reason (Determination of Care)
- If DOC selected, the Determination of Care hyperlink appears

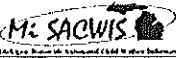
## Determination of Care tool

<div style="display: inline-block; vertical-align: middle;">             SACWIS  <small>Statewide Automated Child Welfare Information System</small> </div>		SIC	<a href="#">Home</a>   <a href="#">Search</a>   <a href="#">Help &amp; Training</a>   <a href="#">Switch Organization</a>   <a href="#">Log off</a> <small>Logged In: SACWIS Account Test   DCS Central Office</small>		
<b>Client Name:</b> <b>Creation Date:</b>	<b>Octavious, Doc</b> <b>10/20/2009</b>	<b>Person ID:</b> <b>Last Modified Date:</b>	<b>76771</b> <b>10/20/2009</b>	<b>Organization:</b> <b>DOC Request Type:</b>	<b>DHS Central Office</b> <input type="text" value="Initial"/>
<b>12 and Under</b>		<b>13 and Over</b>		<b>Adolescent/Young Adult</b>	
<b>12 and Under Details</b>					
<b>Behavior Management:</b> All foster parents are expected to manage behavior. This section evaluates foster parent involvement above and beyond what would normally be expected of a foster parent to manage age appropriate behaviors. Children 0-2 years of age generally do not require special involvement in behavioral management.					
No special involvement provided by the Foster parent. Child actions are age appropriate.				<input type="checkbox"/>	0
Foster parent provides special and extensive involvement in scheduling and monitoring of time and/or activities, and/or crisis management at least weekly. At least 2 hours per week of direct foster parent involvement in scheduling, behavior charting, monitoring, redirecting, supervising and/or managing behaviors.				<input type="checkbox"/>	15
Foster parent provides special and extensive involvement in scheduling and monitoring of time and/or activities, and/or crisis management on a daily basis. At least 1 hour per day of direct foster parent involvement in scheduling, behavior charting, monitoring, redirecting, supervising and/or managing behaviors.				<input type="checkbox"/>	30
Foster parent provides special and extensive involvement in scheduling and monitoring of time and/or activities, and/or crisis management on a constant basis. Constant direct foster parent involvement in scheduling, behavior charting, monitoring, redirecting, supervising and/or managing behaviors.				<input type="checkbox"/>	45
<b>Total:</b>					
<b>Foster Parent Activities</b>					
<b>Foster Parent Activities Ratings Checked</b>					
<div style="border: 1px solid black; width: 100%; height: 100%;"></div>					
<input type="button" value="Print Check"/> <input type="button" value="Clear"/> <input type="button" value="10/20/09"/>					
<b>Mental Health Participation:</b> Therapy/counseling is defined as a clinical or outreach session provided by a master's level or above mental health professional. This does not include case management contacts and/or visits.					
Foster parent does not participate in the child's mental health services or the child is not in counseling/therapy.				<input type="checkbox"/>	0
Foster parent participates at least monthly in consultation with the therapist/counselor or with the therapeutic process for the child. The foster parent is involved in a (monthly) formal discussion with the therapist by phone or in person, focused on the child's treatment plan, behaviors, progress, and/or implementation of the therapeutic plan. This does not include brief and/or casual conversation with the therapist.				<input type="checkbox"/>	7
Foster parent participates at least twice per month with the therapy sessions or with the therapeutic process for the child. The foster parent is involved in a (at least twice per month) formal discussion with the therapist by phone or in person, focused on the child's treatment plan, behaviors, progress, and/or implementation of the therapeutic plan. This does not include brief and/or casual conversation with the therapist.				<input type="checkbox"/>	14
Foster parent participates at least weekly with the therapy sessions or with the therapeutic process for the child. The foster parent is involved in a (at least weekly) formal discussion with the therapist by phone or in person, focused on the child's treatment plan, behaviors, progress, and/or implementation of the therapeutic plan. This does not include brief and/or casual conversation with the therapist.				<input type="checkbox"/>	21
<b>Total:</b>					
<b>Foster Parent Activities</b>					
<b>Foster Parent Activities Ratings Checked</b>					
<div style="border: 1px solid black; width: 100%; height: 100%;"></div>					
<input type="button" value="Print Check"/> <input type="button" value="Clear"/> <input type="button" value="10/20/09"/>					

- System defaults to tab relevant to youth's age
- Can select Medically Fragile tab
- Select DOC Request type (Initial, Renewal, Escalation, De-escalation)
- Narrative is required per section/score > 0
- Calculates level and rate based on the user's input



## > Completed Determination of Care tool

		STG		<a href="#">home</a>   <a href="#">search</a>   <a href="#">help &amp; training</a>   <a href="#">switch organization</a>   <a href="#">log off</a>	
				Logged In: parnell, wayne [ DHS Central Office ]	
				<a href="#">help</a>	
Client Name:	Octavious, Doc	Person ID:	76771	Organization:	DHS Central Office
Creation Date:	10/20/2009	Last Modified Date:	10/20/2009		
<b>Per Diem Cost</b>					
Service Description:	General Foster Care			Service Auth ID :	16074
Cost Reason: *	Determination of Care				
DOC Level:	Level I	<a href="#">Determination of Care</a>		DOC Approval Status :	Pending
Effective Date: *	12/31/12			End Date:	04/30/13
Add On Amount: *	\$6.00	<a href="#">Calculate</a>	<a href="#">Clear</a>		
<a href="#">Approval</a>					
<a href="#">OK</a> <a href="#">Cancel</a>					

- System prefills DOC level based on score
- The worker selects Calculate and MiSACWIS prefills the daily amount (13+ Level I=\$6.00)
- Worker enters the effective/end dates (up to 6 months)
- The approval button is used to route for approval of the add on cost (separate from service authorization approval)
- DOC IV still requires approval from FCD

## > Service Authorization screen Add on Summary grid

**Add On Summary**

Case Reason	Add On Amount	Effective Date	End Date	DOC Approval Status
11203 112034 Age	\$3.35	11/16/2011	11/15/2015	N/A
11203 112034 Determination of Care	\$6.00	12/31/12	06/30/13	Pending

**Add Amount**

**Approval**

☐ Created In Error

**Apply Save Cancel**

- Age add on for 13-21 year old is effective on the youth's 13<sup>th</sup> birthday
- DOC information prefills from add on screen
- DOC Approval Status remains "pending" until approved by DHS supervisor or FCD (Level IV)
- Delete hyperlink is enabled if not yet approved
- Documents upload hyperlink enabled for supporting documentation

## > Payment Rosters

### • NO MORE BUBBLE SHEETS 😊

- Specific security role in MiSACWIS (Roster Verifier) for contracted-private agencies or residential fiscal staff to validate board and care payments
- Roster Verifier has “read-only” access to applicable case information to review for payment processing
- DHS foster homes, out-of-state providers, private agency foster homes when DHS has “borrowed a bed” and non-contracted agencies will use the interactive voice response (IVR) phone in validation system
- DHS central office has DHS Roster Verifier security role for emergency validations
- These processes are only required for board and care payment requests, not for case services payments
- Child-care fund (CCF) payment rosters are created separately for efficiency in processing CCF payments that do not go to MAIN

## > Validate payment request roster screen



STG

[home](#)

[search](#)

[help & training](#)

[switch organization](#)

[log off](#)

Logged In: SACWIS, Account Test | DHS Central Office

[Home](#)

[Intake](#)

[Case](#)

[Provider](#)

[Financial](#)

[Administration](#)

[Services](#)

[Eligibility](#)

[Payment](#)

[Benefits](#)

[Personal Trust Accounts](#)

[help](#)

Financial > Payment > Payment Requests Roster

Organization: PAFC Agency Name or County Name

Worker: Jane Smith

Roster Category/Name: PAFC Name><Bridges Provider ID/Provider Eligibility Type><system date

Approve Payment Requests

Result(s) 1 to 3 of 3

Page 1 of 1

Payee	Person	Service	Unit Cost	Payable Units	Pay Begin / End	Total	Verify	Verified Date	Approve
Art Vandelay	Holmes, Dolly P	0780- General Foster Care	\$54.24	14	07/11/2011 07/31/2011	\$759.36	<input type="checkbox"/>	08/15/2011	<input type="checkbox"/>
Art Vandelay	Holmes, Dolly P	0780- General Foster Care	\$54.24	14	07/11/2011 07/23/2011	\$759.36	<input type="checkbox"/>	08/15/2011	<input type="checkbox"/>
Art Vandelay	AARON, George-Robert V	0780- General Foster Care	\$63.54	14	07/11/2011 07/31/2011	\$759.36	<input type="checkbox"/>	08/11/2011	<input checked="" type="checkbox"/>

[Apply](#) [Save](#) [Cancel](#)

CERTIFICATION: This is to certify that I or the agency I represent have provided the above care. I understand that payment will be made from federal and/or State funds, and that if I have made false statements, submitted false billings, or have left out necessary information on purpose, I may be prosecuted for fraud under applicable Federal or State laws.

Michigan Statewide Automated Child Welfare Information System



## > Update units screen



STG

home | search | help & training | switch organization | log off

logged in as [DHS Central Office]

Home	Intake	Case	Provider	Financial	Administration
Partials	Summary	Payment	Monthly	Personal Trust Accounts	

| help |

Financial > Payment > Payment Requests Roster

Organization: County Name

Workers: Jane Smith

Roster Category/Name: DHS 93.Monroe County/12/26/12

Payment Roster Units

Result(s) 1 to 3 of 3

Page 1 of 1

Payee	Petition	Service	Unit Cost	Unit Balance	Payable Units	Pay Begin / End	Total
Aka	Holmes, Doby P	0032-Substance Abuse Screening	\$5.00	5	5	07/11/2011 07/31/2011	\$5.00
Aka	Holmes, Doby P		\$10.00	3	3	07/11/2011 07/23/2011	\$10.00
Aka	AARON, George Robert V		\$15.00	3	3	07/11/2011 07/31/2011	\$30.00

Apply Save Cancel

- Update units for manual payment case services (DHS-93s mainly)
- Payment roster must be in unapproved status to update units
- Only allowable if the payment request is for a case service (non-placement)
- If number of units exceeds the approved units on the service authorization, the system will display an error message

Michigan Statewide Automated Child Welfare Information System





## > Apply Invoice Number screen

**MSACWIS** 576 Home | Search | Help & Training | Switch Organization | Logout  
 Logged In: SACWIS, Account Type: DHS Central Office

**Home** | **Intake** | **Case** | **Provider** | **Financial** | **Administration**

**Financial > Payment > Payment Requests Roster**

Organization: **County Name** Worker: **Jane Smith**  
 Roster Category/Filter: **DHS 93 Monroe County/12/28/12**

**Apply Invoice Numbers**

Invoice Number: **3259** Invoice Date: **01/27/13**

Result(s) 1 to 3 of 3 Page 1 of 1

Payee	Person	Service	Pay Begin / End	Total	Invoice #	Invoice Date
Alia	Holmes, Dolly P	0032-Substance Abuse	07/11/2011 07/31/2011	\$1.00	<input type="checkbox"/>	
Alia	Holmes, Dolly P	Screening	07/11/2011 07/23/2011	\$10.00	54815	07/11/2011
Alia	AARON, George Robert V		07/11/2011 07/31/2011	\$50.00	<input type="checkbox"/>	

**Apply** **Save** **Cancel**

**HOME** | **HELP & TRAINING** | **PRIVACY & SECURITY** | 576 Version 1.92.0

- Adding invoice number to a payment request
- Can apply one invoice number to multiple payments if needed
- This is not required

# > DHS-659 (replaces DHS-626/DHS-634) and for CCCF

## FOSTER CARE PAYMENT AUTHORIZATION Michigan Department of Human Services

Child Name:	
Child DOB:	
Recipient ID:	
Person ID:	
County:	
District:	
Fund Source:	
Legal Status:	

Service Description:	Begin Date:	End Date:
Provider Name:	Bridges Provider ID:	
Provider Address:	MSACWIS Provider ID:	

Standard Rate:	Case Service Payment Amount:
Age Add On Amount:	Administrative Rate Only:
Administrative/Residential Rate:	Independent Living Mail To Code:
Determination of Care Rate:	
American Indian Child Rate:	
SED Waiver Rate:	
Ward Child:	
Other Add On Amount:	
Budgetable Income:	
Total Daily Rate:	
Total Units:	
Total Payment Amount:	

Private Agency Worker Name:	Private Agency Worker Signature:	Phone:	Date:
Private Agency Supervisor Name:	Private Agency Supervisor Signature:	Phone:	Date:
DHS Worker Name:	DHS Worker Signature:	Phone:	Date:
DHS Supervisor Name:	DHS Supervisor Signature:	Phone:	Date:

### THE FOLLOWING SIGNATURES MAY BE REQUIRED BY POLICY:

District Manager Name:	District Manager Signature:	Date:
Director Name:	Director Signature:	Date:
Central Office Name:	Central Office Signature:	Date:

### Comments:

Department of Human Services (DHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, mental status, sex, sexual orientation, gender identity or expression, political beliefs or affiliation. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.

DHS-659 (7-12) MSW-03

Michigan Statewide Automated Child Welfare Information System

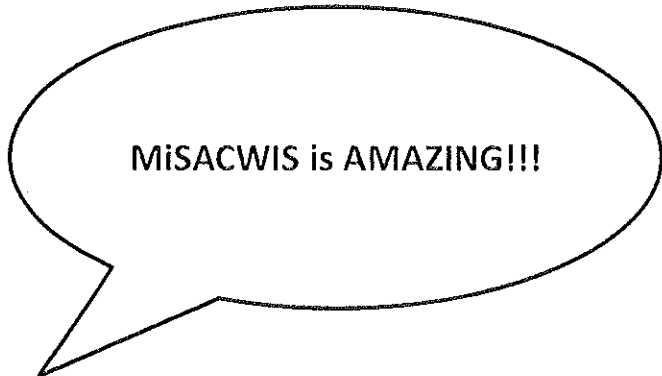


## > MiSACWIS Payment History

- Defaults to organization of the user's login
- Users may search by:
  - Payee/Payee Search hyperlink
  - Provider/Provider Search hyperlink
  - Person/Person Search hyperlink
  - Payment Search criteria
    - Service description
    - Service Authorization Id
    - Subsidy Id
    - Payment request dates
    - Fund Source
    - Voucher number
    - Warrant number
- Receivable Search criteria (Repayment Plans)

- Payment Request Processing
- Payment Requests Search
- Payment Requests Roster
- Manual Payment Request
- Voucher Information
- Payment Sub-accounts
- Payment History Search
- Provider Reimbursement Plan

Payment History Search Criteria			
Organization: <input type="text" value="Default Organization"/>			
<b>Payee Search Criteria</b>			
Tax ID #:	<input type="text"/>	Payee ID:	<input type="text"/>
		<input type="button" value="Search Payee"/> <input type="button" value="Clear"/>	
<b>Provider Search Criteria</b>			
MSACWIS Provider ID:	<input type="text"/>	Bridges Provider ID:	<input type="text"/>
		OR	Providers:
		<input type="button" value="Search Provider"/> <input type="button" value="Clear"/>	
<b>Person Search Criteria</b>			
Person ID:	<input type="text"/>	Recipient ID:	<input type="text"/>
		OR	Persons:
		<input type="button" value="Search Person"/> <input type="button" value="Clear"/>	
<b>Payment Search Criteria</b>			
Service Category:	<input type="text"/>	Payment Start Date:	<input type="text"/>
Service Type:	<input type="text"/>	Payment End Date:	<input type="text"/>
Service Description:	<input type="text"/>		
Contract #:	<input type="text"/>	Fund Source:	<input type="text" value="IV-E"/>
Invoice #:	<input type="text"/>	Voucher Reference Number:	<input type="text"/>
Case ID:	<input type="text"/>	Warrant #:	<input type="text"/>
Service Auth ID:	<input type="text"/>	Warrant/EFT Status:	<input type="text"/>
Subsidy ID:	<input type="text"/>	Warrant From Date:	<input type="text"/>
State Payment Creation From Date:	<input type="text"/>	Warrant To Date:	<input type="text"/>
State Payment Creation To Date:	<input type="text"/>		
<b>Receivable Search Criteria</b>			
MSACWIS Provider ID:	<input type="text"/>	Bridges Provider ID:	<input type="text"/>
		OR	Providers:
		<input type="button" value="Search Provider"/> <input type="button" value="Clear"/>	
Repayment Plan ID#:	<input type="text"/>	Warrant / Check #:	<input type="text"/>
Person ID:	<input type="text"/>	Action:	<input type="text"/>
Action Date:	<input type="text"/>		
Sort Results By: <input type="text" value="Payee"/>			
<b>Search Payment History</b>			



**MiSACWIS training will include additional information on payments.**

# FOSTER CARE PAYMENT AUTHORIZATION

Michigan Department of Human Services

Child Name:
Child DOB:
Recipient ID:
Person ID:
County:
District:
Fund Source:
Legal Status:

Service Description:	Begin Date:	End Date:
Provider Name:	Bridges Provider ID:	
Provider Address:	MISACWIS Provider ID	

Standard Rate:	Case Service Payment Amount:	
Age Add On Amount:		
Administrative/Residential Rate:	Administrative Rate Only:	
Determination of Care Rate:		
American Indian Child Rate:	Independent Living Mail To Code:	
SED Waiver Rate:		
Ward Child:		
Other Add On Amount:		
Budgetable Income:		
Total Daily Rate:		
Total Units:		
Total Payment Amount:		

Private Agency Worker Name	Private Agency Worker Signature	Phone:	Date:
Private Agency Supervisor Name	Private Agency Supervisor Signature	Phone:	Date:
DHS Worker Name	DHS Worker Signature	Phone:	Date:
DHS Supervisor Name	DHS Supervisor Signature	Phone:	Date:

## THE FOLLOWING SIGNATURES MAY BE REQUIRED BY POLICY:

District Manager Name:	District Manager Signature:	Date
Director Name:	Director Signature:	Date
Central Office Name:	Central Office Signature:	Date:

Comments:
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Department of Human Services (DHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.

## Child Care Fund (CCF) Payments in MiSACWIS

All paid placements will generate a pending service authorization; at the time of conversion from SWSS to MiSACWIS, a payment authorization will also be created for CCF payments. Private agency staff has the responsibility to create, update, and correct placements in MiSACWIS; these actions will generate a payment authorization. Service authorizations are also created for paid case services in MiSACWIS. The CCF funding source will display in MiSACWIS on applicable service authorizations.

Private agency staff must view the service authorizations and submit the authorization to their supervisor for approval. The supervisor will then forward the authorization to DHS for approval. In MiSACWIS, a DHS supervisor or above may approve a payment authorizations.

### The Service Authorization Screen

Service Auth ID	Person ID	Client Name	Provider Name / MiSACWIS Provider ID	Service Type / Description	Status	Begin Date	End Date	Created In	Error
054503	7165587	PEACEN, TARA/GIA	/ 11335453	Foster Home / O7EO-General Foster Care	Approved	03/01/2013			

Once the user clicks on the Select hyperlink, the following screen will display.





## The Payment Request Roster

All approved paid case services and board and care payments will become payment requests in MiSACWIS. The ability to search by CCF fund source is also available within the Payment Request Search Page.

The screenshot shows the 'Payment Request Search Criteria' form in the MiSACWIS system. The form is divided into several sections for filtering search results. On the left is a navigation menu with options like 'Payment Request Processing', 'Payment Requests Search', 'Voucher Information', 'Payment/Killing Requests Roster', 'Manual Payment Request', 'Payment Disbursement', 'Voucher or Waiver/LEIT Information', 'Payment History Search', and 'Backward Plan'. The main form area includes fields for 'Pay Begin', 'Pay End', 'Placement / Non Placement', 'Contract #', 'Person', 'Payee', 'Fund Source' (with 'County Child Care Fund' selected), 'Period to Items Marked for Review', and 'Available Providers'. There are also checkboxes for 'Manual Payment / Edit' and 'Service Category'. At the bottom, there are buttons for 'Search' and 'Clear Form', and a 'Records Per Page' dropdown set to 15.

CCF rosters will display to identify CCF payment requests on the Roster Search Screen.

The screenshot shows the 'Payment Request Roster Search' results screen. It displays a table of results for a search performed by 'Riley, Jessica' on '08/01/2014'. The table has columns for 'Payee', 'Responsible Fiscal Entity', 'Person', 'Service/Service Area ID', 'Unit Cost', 'Payable Units', 'Pay Begin / End', 'Total', 'Verified', 'Validated Date', and 'Approved'. The results show one entry for 'Anne' from 'Antrim County' with a unit cost of \$51.24 and a total of \$717.36. Below the table, there are summary statistics: 'Roster Total: \$717.36', 'Approved Total: \$0.00', and 'Adjusted Total: \$0.00'. There are also buttons for 'Update Units', 'Apply Invoice Numbers', and 'Approve/Mark as Approved'. The bottom of the screen shows a footer with 'HOME', 'HELP & TRAINING', 'PRIVACY & SECURITY', and a 'Visit Log' link.

Payee	Responsible Fiscal Entity	Person	Service/Service Area ID	Unit Cost	Payable Units	Pay Begin / End	Total	Verified	Validated Date	Approved
Anne	Antrim County	1100101	0700 - General Foster Care	\$51.24	14	08/01/2014	\$717.36	no		Yes

Roster Total: \$717.36  
Approved Total: \$0.00  
Adjusted Total: \$0.00

Roster Verifiers will approve authorizations on the Roster Validation screen, which includes a certification statement for providers.

Organization: Central Office  
Roster Category/Name: / Testing CCF Roster  
Workers: Riley, Jessica M

Approve Payment Requests  
Res: 1 of 1

Agency	Person	Category	Unit Code	Agency Unit	Pay Cycle	Pay Date	Amount	Agency	Approve
Arise	TIMOTHY	0700 - General Foster Care	\$51.24	14	6/1/13 - 6/15/13	\$717.36			<input type="checkbox"/>

Apply Save Cancel

CERTIFICATION: This is to certify that I or the agency I represent have provided the above care. I understand that payment will be made from Federal and/or State funds, and that if I have made false statements, submitted false billings, or left out necessary information on purpose, I may be prosecuted for fraud under application Federal or State laws.

HOME | HELP & TRAINING | PRIVACY & SECURITY | View Log | MAF number: SACWISAPL100137 - FY 13 Aug 2013 10:01:03 AM 101 Reports Roster

### Foster Care Payment Authorization Form

MiSACWIS has a new payment form, the *Foster Care Payment Authorization* (DHS-659), which includes CCF payments. Users will be able to generate the DHS 659 for a particular child by selecting the Generate Report button under Reports.

Reports

Document Category	Work Item ID	Task ID	Document Title	Work Item Reference	Task Reference	Document ID
FINANCIAL	8000001	8000001	DHS-659 - FC Payment Authorization	Financial	PAYMENTROSTER	

Generate Report

**FOSTER CARE PAYMENT AUTHORIZATION**  
Michigan Department of Human Services

Child Name:	
Child DOB:	
Recipient ID:	
Person ID:	
County:	
District:	
Fund Source:	
Legal Status:	

Service Description:	Begin Date:	End Date:
Provider Name:	Bridges Provider ID:	
Provider Address:	MSACWIS Provider ID:	

Standard Rate:	Case Service Payment Amount:
Age Add On Amount:	
Administrative/Residential Rate:	Administrative Rate Only:
Determination of Care Rate:	
American Indian Child Rate:	Independent Living Mail To Code:
SEO Waiver Rate:	
Ward Child:	
Other Add On Amount:	
Budgetable Income:	
Total Daily Rate:	
Total Units:	
Total Payment Amount:	

Private Agency Worker Name	Private Agency Worker Signature	Phone:	Date:
Private Agency Supervisor Name	Private Agency Supervisor Signature	Phone:	Date:
DHS Worker Name	DHS Worker Signature	Phone:	Date:
DHS Supervisor Name	DHS Supervisor Signature	Phone:	Date:

**THE FOLLOWING SIGNATURES MAY BE REQUIRED BY POLICY:**

District Manager Name:	District Manager Signature:	Date:
Director Name:	Director Signature:	Date:
Central Office Name:	Central Office Signature:	Date:

Comments:
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DHS-659 (7-12) MS Word

## Payment History Search

The Payment History Search screen has specific search criteria. The Payment History Grid will display any payment meeting the search criteria; it also includes the Pay ID, which is an ID specific to the payment request. This screen allows the user the ability to search for payments based on many attributes including fund source.

Users are also able to generate an Excel spreadsheet with all payment requests for the specific provider by selecting the Export/Print button. DHS may submit the Excel spreadsheet along with the individual DHS 659s to the CCF payment staff.

**Payment History Search Criteria**

Organization: Ingham County

**Payee Search Criteria**

**Provider Search Criteria**

**Person Search Criteria**

Person ID: 0165957 Recipient ID: OR Person:

**Payment Search Criteria**

Service Category: Placement ☐ Payment Start Date: 03/01/2013 ☐

Service Type: ☐ Payment End Date: 03/31/2013 ☐

Service Description: ☐

Contract #: Fund Source: County Child Care Fund ☐

Invoice #: Voucher Reference Number: ☐

Case ID: Warrant #: ☐

Service Auth ID: Warrant/EFT Status: ☐

Subsidy ID: Warrant From Date: ☐

State Payment Creation From Date: Warrant To Date: ☐

State Payment Creation To Date: ☐

**Receivable Search Criteria**

Sort Results By: ☐

**(Payment History Search Results)** Page 1 of 1

Payee	Person	State Payment Creation Date	Pay ID	Admin Pay ID	Service Priority	Service Desc	Cost	Units	Fund Source	Payment Start Date	Payment End Date	Warrant Number	Warrant Status Date	Warrant Status	Total
Lutheran Social Services Of Michigan - Lansing	TERESA TAPANZITA ELISE	03/15/2013	3525826			0760- General Foster Care	\$5124.10		CCCF	03/01/2013	03/15/2013	0		Paid	\$5124.10
<b>Page Total: \$5124.10</b>										<b>Payment History Search Total: \$5124.10</b>					

A user may also click on the Select hyperlink on the Payment History Screen to view additional details about the payment. For CCF payments, the County Funded Payment status dropdown may be used to track payment status. The available options in the list include: Pending, Unpaid, Denied, and Paid. This is a user-entered field, as the CCF payments are made outside of MISACWIS.

The Comments field may also be used to support the tracking process.

On this screen, the user may also upload supporting documents by selecting the Document hyperlink on the screen. For example, the user could upload the Clothing Inventory form to support a clothing allowance for a child.

MISACWIS		UAT		Home   Search   Help & Training   Log off	
Home		Inquiry		Financial	
Provider		Financial		Administration	
Payment ID:	3525826	Request Date:	06/02/2013	Ingham County	
Fiscal Worker:	SACWIS, Account Test	Organization:	Ingham County		
<b>Provider Information</b>					
Payee:	Lutheran Social Services Of Michigan - Lansing	Payee ID:	212469	<a href="#">Link to Provider</a>	
Vendor Invoice Number:		Vendor Invoice Date:			
Ter ID:	373048695	Service Provider Name/MISACWIS Provider ID:	Lutheran Social Services Of Michigan - Lansing / 11469614		
<b>Case Person Information</b>					
Case:	Barrack, Kelsa	Case ID:	6273763	<a href="#">Link to Case</a>	
Person:	FERDEN, TAPANGYA ELISE	Person ID:	7165887		
Current Legal Status:	42 - Temporary Court Ward Neglect	Resident ID:	1047913928		
Careworker:	Wellman, Ashly	Service Aff ID:	854503		
<b>Service Authorization Details</b>					
Case ID:	6273763	Person ID:	7165887	Service ID:	0780
Service Description:	General Foster Care	Approved By:	03/01/2013		
<b>Service Information</b>					
Service Category:	Placement	Fund Source:	IV-E		
Service Type:	Foster Home	Override Fund Source:			
Service Description:	0780-General Foster Care	Warrant Number:			
Responsible Fiscal County:	Ingham County	Payment End Date:	06/01/2013		
Payment Type:	Warrant	Unit:	1.0		
Payment Start Date:	06/01/2013	Third Party Payment Amount:			
DHS 93 Invoice Number:		Unit:	1.0		
Payment to be made outside of MISACWIS:	<input type="checkbox"/>	Unit:	1.0		
County Funded Payment Status:	Paid	Unit:	1.0		
<b>Comments:</b> Comments field can be used to reflect warrant information, payment date by court etc. <a href="#">Print Check</a> <a href="#">Check</a> <a href="#">Notes</a>					
<b>Document</b>					
<b>Admin Only:</b> Maintenance: \$1724 Age Add On Amount: \$0.00 Treatment / Administration: \$37.00 Medical: \$0.00 Other / Non-Split: \$0.00 Contract Rate: \$0.00 Contract Add On: \$0.00 Standard Rate: N/A Age Add On Amount: N/A EOC Amount: N/A Other Add On Amount: N/A Total Add On: N/A Unit Rate: 0 <b>Total Amount:</b> \$ 642.40					

The Department of Human Services (DHS) is implementing a new computer system for child welfare in Michigan – the Michigan Statewide Automated Child Welfare Information System (MiSACWIS). Both DHS and contracted private agency staff will use MiSACWIS to document case activities. DHS expects to implement the new computer system in October 2013.

As a provider for DHS children, you will no longer receive a DHS-4765 Children's Foster Care Invoice (commonly known as a "bubble sheet"). MiSACWIS will eliminate the need for this paper process when requesting foster care payments. Moreover, this validation will occur for all funding sources, including county-funded payments.

The interactive voice response (IVR) system is part of the new MiSACWIS. You will validate your payments through the IVR via a touchtone phone if you are a:

- DHS licensed foster parents
- Non-contracted providers
- Unlicensed relatives who are receiving state ward payments
- Private agency foster homes if DHS has "borrowed a bed"
- Out-of-state providers (all provider types)

To validate the days in care, you will need two pieces of information, your Bridges Provider ID, which is included on your Children's Foster Care Invoice, and a PIN number. In October 2013, you will receive a Provider Letter with your PIN number. Payment periods will continue to cover a two-week period. You will be able to validate the days in care for each child in your care at the end of the two-week period.

DHS is working on a training video for the IVR system; additional information, including the IVR phone number, will be provided when the training is ready.

Question regarding the new payment process should be directed to your foster care worker.